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# TREATMENT PROTOCOL: SYNCOPE \*

- 1. Basic airway
- 2. Spinal immobilization prn
- Pulse oximetry 3.
- Oxygen prn 4.
- Advanced airway prn
- If shock, treat by Ref. No. 1246, Non-Traumatic Hypotension Treatment Protocol 6.
- Cardiac monitor: document rhythm attach ECG strip if dysrhythmia identified 7. 12-lead ECG if suspected cardiac origin
- Venous access prn 8.
- Perform blood glucose test; if blood glucose is less than 60mg/dl: 9.

Consider oral glucose preparation if patient is awake and alert

# Dextrose 50% 50ml slow IV push or 10% 250mL IVPB

Pediatric: See Color Code Drug Doses/L.A. County Kids Dextrose 10% 5mL/kg IV push

Patient's weight <24kg - administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/ka

Patient's weight >24kg - administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg, OR rapidly infuse 120mL of 250mL IVPB, if no symptom improvement, administer remaining dose to a total maximum dose of 5mL/kg

Caution in administering to alert patients with acute focal neurological deficits If unable to obtain venous access:

### Glucagon

1mg IM

Pediatric: See Color Code Drug Doses/L.A. County Kids

- If cardiac dysrhythmia, treat by Ref. No. 1212, Symptomatic Bradycardia or Ref. No. 1214, Tachycardia with Pulses
- **CONTINUE SFTP or BASE CONTACT** 11.
- 12. If blood glucose remains less than 60mg/dl:

# Dextrose 50% 50ml slow IV push or 10% 250mL IVPB

Pediatric: See Color Code Drug Doses/L.A. County Kids

Dextrose 10% 5mL/kg IV push

Patient's weight <24kg – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg

Patient's weight ≥24kg – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg, OR rapidly infuse 120mL of 250mL IVPB, if no symptom improvement, administer remaining dose to a total maximum dose of 5mL/kg

If unable to obtain venous access

#### Glucagon

1mg IM

May be repeated every 20min two times

Pediatric: See Color Code Drug Doses/L.A. County Kids

EFFECTIVE DATE: 7-1-11 REVISED: 02-01-17

**SUPERSEDES: 03-05-13**